21503 59957		State of Ne Investig		Moto	or Vel	nicle	e Ac	cide	en	t Re	eport	;	Shee	t <u>1</u>	of	2	_
2	Total Number of Vehicles	I DISTILL A - A		Agency Case No. B5-	084167				F	HIT & RUN		INVESTIGA	TION I		NO	? L 1	_
A/1 01 A/2	DATE OF O9 PLACE COU	M / D D / //11/2015		Y S	M T V	V TH F	s X D	TIME OF ACCIDEN POLICE NOTIFIED		(In Mill 1555 1557	itary Time)	STATE US	E ONLY				
В	OF ACCIDENT CITY								l	PRIVATE	YES NO	09/11	/201	5			
70	ROAD ON WI	HICH STREET/	o. Van Do	orn/Park P	Place-No	rmal B	lvd			PROPERT ONE-WAY	YES NO	LATITUDE					
с 1	DISTANCE FRO	1	N	S E W	OF MILEPOST			HIGHW	/AY N	STREET? NO.	<u> </u>	LONGITUD	ÞΕ			\dashv	
D		IF AT INTERSI			M			AT INTE									
1						ET ○1 6.00	MILES N	I S I	W OF NEAREST STREET, BRIDGE, RAILROAD CRO X Park Place					ROSSING	<u>G</u>		
V1/M 16 V2/M	MILES	N S E	ACCIDENT V	VAS OUTSIDI			W OF N	STANCE EAREST OR TOWN		OM NEAF	REST TOWN						
01 E 2	R. WORK ZONE 1 S. PEDESTRIAN S1 S2 S3 S4 S5-a S5-b S6-a S6-b DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? OVER X NO																
<u>-</u> F	DDIVED		<u>'</u>		VEI	HICLE I	NO. 1				STATE				> FEMALE	7	
1	DRIVER LICENSE DRIVER SHANNON	No. V00344						PHONE 402-9	984	-5142	(Of License)	NE LOCAL NO	SE O.	x S	MALE		
1 V2/N	DRIVER ADDRESS 7827 STON	IEWALL CT, LI	NCOLN, I	CITY, STA							DATE OF BIRTH (MM / DD / YYYY	02/23	3/197	74		V1/1	_
8	OWNER PHONE LOCAL NO.									- 18 V1/2	_						
^G 2	OWNER ADDRESS								V1/3								
Н	LICENSE PA	NO. SCE138	•							YEAR te Expires)	2016		STAT (Of Pl		NE	V 1/3	
5 V1/O	VEHICLE	2005	Ford	MOI Es	scape		Mediu	_E m/larg	e u			STIMATED D	DAMAG D \$	4000	1	V1/4	
3 V2/O	VEHICLE ID NO. (V/N) 1FMYU03125KC94598					INSURANCE COMPANY Farm Bureau								V1/5 - 18	_		
1	Tracy's Auto (south) Towed BY Capital Towing					POLICY NO. 7473793									V1/6		
1	DRIVER	ua G22002	970		VEI	HICLE I	NO. 2				STATE	NE	SF	x 5	FEMALE	35	
V1/P	DRIVER LICENSE NO. G22002879 DRIVER ALLEN C PLUCKNETT PHONE 402-488-4450						MALE										
1 V2/P	DRIVER ADDRESS 7828 STONEWALL CT, LINCOLN, NE 68506 CITY, STATE, ZIP O5/18/1937						V2/1 18										
1	OWNER ALLEN C PLUCKNETT PHONE 402-488-4450							1/2/2									
^J 01	OWNER ADDRESS CITY, STATE, ZIP CITATION O. PENDING NO.						V2/3	_									
V1/Q	LICENSE PA		,							YEAR ate Expires)	2016		STAT (Of Pl	TE ate)	NE	V2/4	_
1 V2/Q		2009	Ford	МОГ	scape		Mediu	m/larg	eι	color		STIMATED D)	V2/5	_
4 K	VEHICLE ID NO. (VIN)	1FMCU93GX9KA82587									Farm		-			18	
01	TOWED TO			TOWED BY						POLICY NO.	5 5160-C25-2	27T				V2/6 35	
	Cor	nplete this se Complete a continuati	ection for	all injur	red pers	ons					OF BIRTH	Seat Position	2 Eject	3 Body Region	Injury Sev. Ti	sex	K
VEH. #		·		DRESS								T COMO!!		, togioi			_
	LOCAL NO.	OCAL NO. MEDICAL FACILITY NAME				EMS SERVICE NAME					EMS RUN REPORT NO.					_	
VEH. #	NAME	<u> </u>	AD	DRESS		I.											_
	LOCAL NO.	MEDICAL FACILITY	NAME			EMS SER	VICE NAME					EMS RU	N REPO	DRT NO.	1 1		_
VEH. #	NAME		AD	DRESS													_
	LOCAL NO.	MEDICAL FACILITY	NAME			EMS SER	VICE NAME					EMS RU	N REPO	RT NO.			_

	THE FOLLOWING	INFORMATIO	N IS REQUIRED FO	OR ALL ACCIDENT	S				
	1112 1 0220111110	INDICATE	PENED AGEN						
					-084167				
Indicate North									
by Arrow									
							•	•	
POI	I					٠	٠		
	s' W of W curb on Park S of N curb on Van Dor								
Skid	ds-V133'								
	eet Width n Dorn26'								
	asurements Approxima t To Scale	ate							
			2 1 1						
Norm	nal Blvd		Van Dorn	Pa	rk Place				
· · · · · ·		ION OF ACCIDENT	BASED ON OFFICER'S II		•	•	•	•	
traffic in front of him stopped	I sharply, so he stopped as	s well. Driver 2 sai	id that once stopped he w	as hit from behind by veh	nicle 1.				
OBJECT DAMAGED O'	OWNER NAME	ADDRESS		PHONE		APPRO	X. COST OF	DAMAGE	
OBJECT DAMAGED O	WNER NAME	ADDRESS		PHONE		APPROX. COST OF DAMAGE			
SES		ADDRESS			HONE	ONE			
NAME NAME NAME		ADDRESS	;		Р	HONE			
VEHICLE MOVEMENT	POINT OF IMPA	ACT AND	AIRBAG DEPLOYED	RESTRAINT USE	ТОТ	Δ1 V	EH 4	VEH 4	
BEFORE COLLISION VEH N S E W ROAD OR HIGHWAY NAME	MOST DAMAGI (Enter numbers for	ED AREA	VEHICLE 1	VEHICLE 1	OCCUP	ANTS	1 1	2 1	
	-	,	-	_	ALCOF TESTII				
	POINT OF IMPACT 01	VEHICLE 2	4	1 None used - vehicle occupar	ALCOHO LEVEL	. —	Y	Y	
	MOST	MOST	1 Deployed - front 2 Deployed - side	2 Lap & shoulder belt used 3 Shoulder belt only used	BAC LEV		X N X	. IN	
1 01 06 Turning left 07 Making U-turn	1 10 1	AMAGED 05 AREA	3 Deployed - both front/side4 Not deployed5 Not applicable/	4 Lap belt only used 5 Child safety seat used	ALC	OHOL/	Driver No. 1		
2 11 08 Entering traffic lane	00 None 02	03 04	No airbag available			RUGS PECTED	1	Driver No. 2	
01 Essentially 09 Leaving straight ahead traffic lane 02 Backing 10 Parked	09 Top & windows		6 Unknown	6 Child booster seat used 7 DOT approved helmet used 8 Costume helmet used	1 000	Neither alcohol nor drugs suspected Yes - alcohol suspected			
	1 10 Offdereafflage 01 -	7 05	6 Unknown VEHICLE 2	7 DOT approved helmet used	1 Neith			No. 2	
03 Changing lanes 11 Slowing or 04 Overtaking/ stopped in traff Passing 12 Other	11 Total (all areas)	05	VEHICLE 2	7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown VEHICLE 2	1 Neith 2 Yes - 3 Yes -	alcohol su drugs sus alcohol &	spected	No. 2 1	
03 Changing lanes 11 Slowing or 04 Overtaking/ stopped in traff	11 Total (all areas) 12 Other 08		VEHICLE 2 - 4	7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown	1 Neith 2 Yes - 3 Yes - 4 Yes -	alcohol su drugs sus alcohol & own	ispected pected drugs suspe	No. 2	
03 Changing lanes 11 Slowing or 04 Overtaking/ stopped in traff Passing 12 Other 05 Turning right 13 Unknown	11 Total (all areas)	07 06	VEHICLE 2 4 MENT DIn Police Departmen	7 DOT approved helmet used 8 Costume helmet used 9 Restraint use unknown VEHICLE 2	1 Neith 2 Yes - 3 Yes - 4 Yes -	alcohol su drugs sus alcohol & own Photog taken?	raphs	No. 2 1 suspected ected YES NO	